

SPRING COLORING CONTEST

PARTICIPANT REGISTRATION SHEET!

Please submit one of these registration sheets with the coloring sheet.
In case of submitting multiple children's coloring sheets, use one sheet per each child.

Child's Name: _____ Child's Age: _____

Parent or
Guardian's Name: _____

Home
Address: _____
Street City/Town State Zip Code

Best Email to Contact: _____
Please Print legibly, Email may be used to contact if submitted sheet is a winner

Best Number to Contact: () _____
Please Print legibly, Number may be used to contact if submitted sheet is a winner

THANKS FOR PARTICIPATING!